



Office of Information Technology



April 4, 2006

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Dates to Remember Section 508 Stage II Training: April 2006

IHS Technology Conference: June 19-23

WELCOME TO THE IHS IT NEWSLETTER

Spring has arrived, and it has brought many opportunities to gain and share technical information. In this issue of the *IHS IT News* several conferences are mentioned (the OTSG meeting in Michigan, the IT Conference in Albuquerque, and the Native Peoples of North America HIV/AIDS Conference in Anchorage). I hope you are fortunate enough to attend one of them. If you do, please send an email about your conference experience to the editor at: teagan.geneviene@ihs.gov.

Hot Topics



CRS Award Winning Software!

The Indian Health Service Receives the Nicholas E. Davies Award of Excellence

By: The Davies Workgroup

The Healthcare Information and Management Systems Society (HIMSS) selected the Indian Health Service Clinical Reporting System (CRS) as one of only two winners of the Public Health Davies Award. HIMSS is the healthcare industry's membership organization, and is exclusively focused on providing leadership for the optimal use of healthcare information technology and management systems for the betterment of human health. The Davies Award program was originally created in 1995. The program honors Dr. Nicholas E. Davies, an Atlanta-based practice physician committed to the ideal of improving patient care through better health information management. He was a member of the Institute of Medicine Patient Record Study Committee, which coined the term "computer-based patient record."

The Indian Health Service Clinical Reporting System is a software application that is used to collect, report, and evaluate IHS clinical performance across the organization.

This topic is continued on the following page.

Hot Topics

CRS Award Winning Software Continued

The Indian Health Service Receives the Nicholas E. Davies Award of Excellence



Pictured from left to right: Dr Theresa Cullen, MD, MS (Clinical Informatics Consultant, CRS Clinical Lead), Elaine Brinn (National GPRA Data Analyst- National Programs), Michele Gemelas, R.Ph (Performance Improvement Coordinator, Warm Springs Health & Wellness Center), Carolyn Johnson, R.Ph (Health Information Specialist, Warm Springs Health & Wellness Center), Lori Butcher (Systems Development, Cimarron Medical Informatics), Keith Longie (Chief Information Officer, Indian Health Service).

The Healthcare Information and Management Systems Society (HIMSS) annually honors individuals, groups and organizations who have made significant contributions to the society, their organizations, and the healthcare IT profession. HIMSS has established specific criteria for each award. A list of the categories in which awards are given, as well as the winners can be found at: http://www.himss.org/ASP/ContentRedirector.asp?ContentId=65648

The two winners of the Public Health Awards of Excellence were:

- Indian Health Services (IHS) Clinical Reporting System (CRS) Warm Springs, Oregon
- NC Disease Event Tracking and Epidemiologic Collection Tool (formerly NC BEIPS) — Chapel Hill, North Carolina

CRS produces an electronic report of a facility's performance data, specific to any or all of 200 clinical indicators, which represents 41 clinical topics, such as Pap Smear Rates, diabetes management indicators, and Childhood Immunizations. Clinical performance information is critical to improving quality outcomes in healthcare. The National CRS report provides a summary of the local CRS indicator results compared to national performance and agency goals, as well as compared to Healthy People 2010 and Health Plan Employer Data and Information Set (HEDIS) measurements.

The application was submitted by staff from the IHS Office of Information Technology, Warm Springs Health & Wellness Center, Cherokee Indian Hospital, and the California Area Office. A committee of healthcare clinicians, CIOs and former Davies Award winners visited the Warm Springs Health & Wellness Center for a demonstration of the Clinical Reporting System. Information on the Davies Award for Public Health can be found at:

http://www.himss.org/ASP/daviesAward.asp. Please visit the IHS Clinical Reporting System Website at: http://www.ihs.gov/cio/crs/.

The Electronic Public Health System Team

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Theresa Cullen, MD, MS	National Informatics Consultant, CRS Clinical Lead
Stephanie Klepacki	Management Analyst, Rose International
Michele Gemelas, R.Ph.	Performance Improvement Coordinator
Colleen Hayes, MHS, RN	Performance Improvement Coordinator
Carolyn Johnson, R.Ph.	Health Information Specialist
Chris Lamer, Pharm D	Clinical Applications Coordinator
Michele Miller	Information Technology Specialist
Carol Goodin, R.Ph, M.P.H.	GPRA Coordinator- National Programs
Elaine Brinn	National GPRA Data Analyst- National Programs
Lori Butcher	Director, Systems Development, Cimarron Medical Informatics

Hot Topics

2006 IHS Information Technology Conference Albuquerque, NM June 19 - 23

The IHS Information Technology Conference for 2006 will be here before you know it. This year's IT Conference will be held at the Albuquerque Convention Center. Keep an eye on the IHS Web site for additional information as it becomes available.

Attendees will have the option of staying at Doubletree Hotel or the Downtown Hyatt Regency Hotel. Both hotels are within walking distance of the convention center. Registration is open until June 21, 2006.

For additional information please send an email to: <u>TechConf@ihs.gov</u>.



Albuquerque Convention Center

HHS Learning Portal Update

Learning Management System

The HHS Learning Portal is an electronic Learning Management System (LMS) – a web-based learning system that facilitates learning and uses a collaborative, comprehensive, integrated approach. It will provide access to online training, create a department-wide training database, allow for enrollment opportunities for instructor-led training, and provide an interface to the United Financial Management System. The goal is to provide a consolidated Training Management Structure for all of HHS.

IHS has designated an initial project team and begun preliminary steps to implement the new LMS. The team includes: Vee Garcia, Susan Hall, Jennifer Hovencamp, April Tinhorn, and Clay Ward. They will need each area's support throughout the implementation and migration process. IHS is currently scheduled for migration to the new system on August 31, 2006.



Albuquerque, NM

Visitors to Albuquerque, NM may find links to more information at these sites:

http://www.cabq.gov/visiting.html
(City of Albuquerque)

http://www.abqchamber.com/co
ntent/VisitorInfo.asp
(Albuquerque Chamber of Commerce)







Clinical Scheduling for Windows integrates directly with existing RPMS clinical scheduling in PIMS 5.3, and works alongside other RPMS software.

Hot Topics

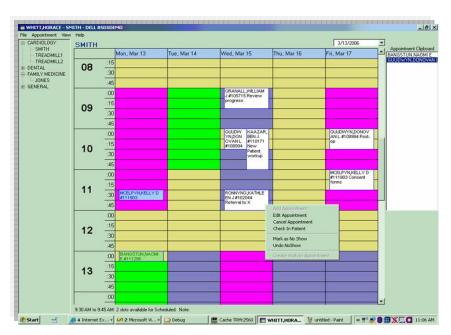
Clinical Scheduling for Windows (BSDX)

Just released – a new RPMS Windows-based software application to support RPMS Clinical Scheduling! This new application provides an easy-to-use graphical interface for the management of clinical appointment scheduling.

Clinical Scheduling for Windows is the Windows Extension of the PIMS Scheduling program. It provides many of the same functions as PIMS Scheduling, but with the added convenience and usability of a Graphic User Interface (GUI). Windows Scheduling for RPMS integrates directly with the existing RPMS clinical scheduling in PIMS 5.3 and works alongside other RPMS software.

The Windows scheduling package adds several new features that are unavailable in the character-based PIMS 5.3 environment, including:

- Patients can be scheduled with more than one resource at a time.
 For example, patients can be scheduled both with a provider and another resource (treadmill, radiology resource, etc) simultaneously.
- Clinic availability and patient appointments can be scheduled at any time of day.
- Clinic time devoted to particular kinds of patient care, such as walkins or exams, appears on the clinic schedule in a particular color making it easy to see what times are available for various types of appointments. The colors may be locally customized.
- Appointments may be easily changed by using the mouse to "drag" the appointment from one area of the schedule to another.
- Clinic schedules may be set up easily using the visual calendar. Clinic availability patterns may be saved in a template, making it easier to set up clinics that have complex patterns.



View of a BSDX screen

Tribal IT Support Initiatives

By: Samuel Berry, MCDBA - Office of Information Technology

As part of our continuing resolution to improve communications with Tribal Customers, the OIT Self-Determination Team distributed our first Tribal HTML E-mail newsletter during the last week of February. Entitled *Tribal IT Solutions*, this newsletter was the first in OIT history to be specifically targeted toward Compacting and Contracting Tribes. To receive a copy of the newsletter, email Sam Berry at: Samuel.Berry@ihs.gov.

As mentioned in the last issue of the IHS IT News, we are in the process of updating the core packages. The updates are being finalized and the material should be ready for release in mid April.

In December of 2005, we had our first Agency Lead Negotiator (ALN) – Information Systems Coordinator (ISC) Joint Meeting. It was a very successful meeting as it was the first time that ALN-ISC were able to sit down together as a group to discuss issues and success stories about negotiations and tribal problems. At this meeting the group shared success stories to help improve the consistency of Tribal support throughout the nation, and developed a list of Action Items that will help improve communication, understanding and negotiations in the future. We will be distributing a quarterly newsletter to ALNs, ISCs, and others who are interested in receiving it, to share the results of the meetings. If you'd like to receive this, please email Samuel.Berry@ihs.gov. Be sure to include your preferred email address.

Three additional meetings are planned for FY 2006, and the intended result is to improve consistency in how HQ and the Areas support Tribal customers, as well as improve both ALN and ISCs understanding of their roles in successful negotiations.

If you plan to attend the OTSG meeting in Michigan this May or the Tech Conference in Albuquerque in June, look for our breakout sessions. Please attend them if you would like more information on our Teams mission, activities and progress, or if you have valuable information that you would like to bring up during the Q&A portion of the sessions.

Embracing Our Traditions, Values, and Teachings

Native Peoples of North America HIV/AIDS Conference Anchorage, Alaska: May 2 - 6

This conference, designed by and for Native Americans, is expected to attract an audience of approximately 800 people. The subjects presented at the conference are centered on items of particular relevance to Native Americans. The program is intended to "...inspire, inform, and equip participants with the culturally targeted information and knowledge needed to make a difference in Native communities..."

The host city is Anchorage, Alaska. The conference is sponsored by the National Planning Committee in collaboration with the Office of AIDS Research of the National Institutes of Health, part of the U.S. Department of Health and Human Services. For more information about the conference, please visit: www.embracingourtraditions.org.

Embracing Our Traditions, Values, and Teachings: Native Peoples of North America HIV/AIDS Conference c/o Social & Scientific Systems, Inc., Conference Secretariat 8757 Georgia Avenue, 12th Floor Silver Spring, MD 20910 USA

Toll-free: 800-749-9620

E-mail: embracingourtraditions@s-3.com

A New Name!

The Self-Determination Team will be renamed! Most people associate the words Self-Determination with compacting Tribes. Since we support both compacting and contracting tribes, we are considering a new, more accurate name for the team, such as OIT Tribal Support Team. If you have suggestions for the new name, please forward them to: Samuel.Berry@ihs.gov





View of Anchorage

Attendees Give WebEx Training an A+

"I think WebEx is a super great teaching tool. It saved me 10 hours of driving, a day away from work and it was a *very* effective learning strategy. I learned a lot. Thanks!" – *Leslye*, *Winnebago Hospital*, *Nebraska*

"I love WebEx and can't wait until the voice feature is installed so that we can record the sessions with the discussion." - Nicholas, American Indian Health & Services, California

"The WebEx session was totally convenient for our clinic. Much better than traveling to the Area Office for training." – Louise, Lassen Indian Health Center, California

"This will be very useful. Having it brought to us rather than traveling to another site enabled more people to participate here." – Joanne, Rosebud Comprehensive Health Care Facility, South Dakota



Beta-Test Sites Needed!

Beta-test sites are needed for testing CRS v6.1. Version 6.1 is scheduled to be ready for beta testing in mid-April 2006. The beta testing will last 4 weeks. Please contact Stephanie Klepacki by e-mail at: Stephanie.Klepacki@ihs.gov or by phone at (505) 821-4480.

Clinical Reporting System (CRS) Update

By: Stephanie Klepacki, CRS Project Coordinator

CRS Training Goes WebEx

This year, Clinical Reporting System (CRS) training is available by (1) having the instructors come to the site, (2) via live Internet (e.g. WebEx), or (3) a combination of both. One-half of the 12 IHS Area Offices chose to receive their training via WebEx, and it has proven to be extremely successful. With WebEx training, participants can attend the class from their own computer at their office or in a conference room with other attendees. The WebEx training has enabled more people to attend the training than ever before since they do not need to spend time and money traveling to the training. This is very beneficial for providers since their time away from their facility is limited. Over 120 people received training in Aberdeen Area alone, which is 72% of ALL the people trained on CRS in 2005!

Requirements for WebEx training include pre-registering online for the class, a one-time installation of the WebEx software, a computer and a phone. Instructions for registering and attending the class are sent out several weeks before training and include a contact name and number if additional information is needed.

Due to the success of this type of training, IHS is purchasing equipment that will enable a session to be recorded, which could then be viewed by an attendee at his/her convenience. In addition, next year's training will include even more WebEx sessions and multiple types of training sessions will be offered that will be tailored to the audience.

If you would like more information on CRS training, please contact Stephanie Klepacki by e-mail at <u>Stephanie Klepacki@ihs.gov</u> or by phone at (505) 821-4480.



Welcome Newcomers!

Employee Profile: Karen Schellenberger

Karen Schellenberger, Office of Information Technology

Karen Schellenberger is the newest member of the IHS web team. She came to us from SAIC, and has been involved in web development for about ten years. Originally from Indiana, Karen has lived in Albuquerque for the past six years. Karen will be integrating with the web team members in Albuquerque, NM. She will also be working with other members of the IHS Web community from various locations.

Welcome Karen!



Employee Profile: Michael McSherry

LT JG Michael McSherry, Office of Information Technology

Michael McSherry is a recent graduate of New Mexico State University, having obtained a Bachelor of Science degree in Engineering Technology. He has previously worked as a site supervisor for the City of Albuquerque. He began working as a COSTEP (Commissioned Officer Student Training and Extern Program) in 2004. Though he is modest when asked how he came to be here at IHS, Michael was selected from the Senior COSTEP program in January 2005. Upon completion of his bachelor's degree, he joined IHS OIT in December 2005. Michael is located in Albuquerque, NM.

Outside the office, Michael gives back to the community by volunteering as Assistant Junior Varsity Coach for the Cibola High School men's tennis team. Tennis is one of his favorite hobbies, but he also likes building &/or modifying computers and researching components. Michael also enjoys spending time with his fiancée, Johanna. Perhaps we'll get a wedding date for them soon.

Michael brought along a lot of enthusiasm for his work when he came to IHS OIT. We're happy to welcome him to the team!



Welcome Karen Schellenberger and Michael McSherry!

If you have recently begun working in the information technology community in the Indian health program, please let me know. It would be great to share a feature about you.

teagan.geneviene@ihs.gov



Mike McSherry after hours

HHS Enterprise Email System Update

By Matt Parkinson, IT Specialist

The IHS E-mail Migration Team has made great progress since our last *Information Technology News* article. At the end of January, the IHS Migration Team submitted a comprehensive Migration Plan to HHS which outlined our approach for migrating users in HQ, Area Offices, and large health care facilities. On January 31, 2006 the first IHS user was successfully transitioned to the HHS Enterprise Email System (HHSMail).

The IHS E-mail Migration Team has selected the Quest e-mail migration tool to transition IHS mailboxes to HHSMail. This tool was chosen for its ability to significantly reduce the amount of time and effort required to complete the email migration. The Team will be spending the next few weeks installing, configuring, and testing this tool.

On March 17, 2006, a group of Early Adopter users was migrated to HHSMail. This will be followed by two Pilot test migrations in April. The IHS E-mail Migration Team expects to transition 8,000 – 10,000 IHS users in May and June of 2006. While there has been much progress in planning for the transition, the team continues to flush out a detailed schedule for all IHS locations. The preliminary schedule will be presented to IHS management in early April.

In the coming weeks, the IHS Migration Team, in coordination with your Area Information Systems Coordinator and local IT staff, will be sending out information to help you prepare for the transition to HHSMail. A website has also been established (http://workgroups.ihs.gov/sites/HHSMail) to provide you with the latest status and information on the project. Should you have any questions or concerns, please send them via email to hhsmailteam@ihs.hhs.gov.



A group of Early Adopter users has already been migrated to HHSMail.

Email Hoaxes

By: Cathy Federico, CISSP

"You've won a trip to Hawaii!" "Free Money, just follow these simple steps!" You may have seen these subject lines in your email boxes. While it would be nice to win that trip to Hawaii or free money, these emails are most likely hoaxes - used to grab your attention and convince you to forward to everyone you know. A hoax is defined as an act, document, or artifact intended to deceive or defraud. Email hoaxes are more than mere annoyances, as they may lead some users to routinely ignore all virus warning messages, leaving them vulnerable to a genuine, destructive virus.

An email may be a hoax if the following identifiers are present:

- Suggests tragic consequences for not performing some type of action
- Promises money or gift certificates
- Offers instructions or attachments claiming to protect you from a virus
- Displays multiple spelling or grammatical errors
- Claims it's not a hoax
- Urges you to forward the message or has already been forwarded several times

The best ways to protect yourself against hoaxes is to pay close attention to the sender and the subject lines of your emails. Be suspicious of any emails from unfamiliar sources.

If you want to check the validity of an email, the following websites provide information about hoaxes:

- Symantec Security Response Hoaxes: http://www.symantec.com/avcenter/hoax.html
- McAfee Security Virus Hoaxes: http://vil.mcafee.com/hoax.asp

If you have questions or would like further information, you may contact your Information System Security Officer (ISSO).

UFMS Explained

By: Paul Margolis

UFMS is now in full swing at IHS – ready to help improve the performance of federal operations. We felt a more detailed explanation of the system was in order.

What is UFMS?

The Unified Financial Management System (UFMS) Program was initiated in 2001 to improve financial performance throughout the Department of Health and Human Services (HHS). This initiative will provide an integrated, Department-wide financial management solution that aligns business and technology to enhance the Department's ability to fulfill its mission. UFMS is targeted at federal operations. It will help IHS to produce consistently relevant, reliable and timely financial information to support decision-making and cost-effective business operations at Headquarters, the Area Offices and Service Units. Terry Hurst, Director of the UFMS Program Management Office (PMO), is currently leading the program and coordinating the effort across HHS. The IHS UFMS Executive Champion is Robert Mc Swain, and Project Sponsor is Tommy Thompson.

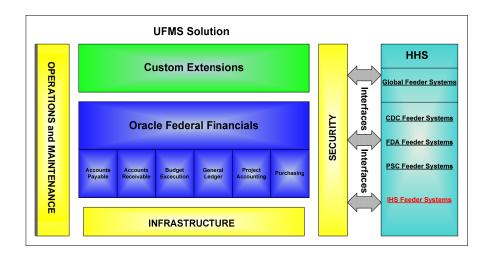
When did IHS begin the UFMS effort?

In 2002, a Global Design Team developed common processes for Business Analysis, Business

Transformation, and Technology Analysis. IHS personnel participated in this effort. The team has been working to develop a common Budget and Accounting Classification Structure (BACS) and systems architecture for all of HHS, while allowing for specific elements across different agencies. The Centers for Disease Control (CDC) and Food and Drug Administration (FDA) went live with UFMS in April 2005, and the Program Support Center (PSC) will be following suit in October 2006. IHS is scheduled to go-live in October 2007. The IHS Project Team Kickoff meeting was held January 18-19, 2006 at UFMS Headquarters in Rockville, Maryland.

What comprises the UFMS solution?

The UFMS Solution is based on six modules in Oracle U.S. Federal Financials; Accounts Payable (AP), Accounts Receivable (AR), Budget Execution (BE), General Ledger (GL), Project Accounting (PA) and Purchasing (PO). UFMS will continue to interface financial data with other HHS Feeder Systems such as the Central Contractor Registration (CCR) and E-Gov Travel, as well as IHS Feeder Systems such as Contract Health Service (CHSMIS). Custom Extensions will provide functionality that is not included within the Oracle Federal Financials Suite, such as Grants.



UFMS flow chart

This explanation of UFMS continues on the following page.

UFMS Continued

What are the general benefits of UFMS?

UFMS will help provide more timely and accurate information for management, increase compliance with legislative mandates and regulatory requirements, maintain clean audit opinions, and improve internal controls as well as the infrastructure for collecting third-party reimbursements. Other UFMS benefits are:

User-Friendly System – UFMS is a web-based application that runs on a Java Applet and can be accessed by any computer on the IHS network. The Graphic User Interface (GUI) uses Microsoft Windows rather than the current DOS-like environment used to interface with CORE. There is a single toolbar with drop-down menus that allows different activities to be executed in one application. In addition, UFMS provides the ability to add attachments (Word documents, E-mails, etc.) to UFMS

- documents (AP invoices, obligations, etc.) It also allows users to extract data directly to Excel spreadsheets.
- Search Capabilities "Wildcards" can be used to find documents and information when the users do not have the full name/information to access data directly. For example: If users are looking for Aberdeen's radiology costs for a particular Service Unit (SU), but forgot the SU code/number, they can conduct wildcard searches to assist them in identifying the specific SU.
- Controls UFMS enables users to set various controls to prevent overspending and going anti-deficient.

For more information on UFMS, please visit www.hhs.gov/ufms .



UFMS General Awareness transformation poster



New BHS Replaces CDMIS

By: Denise Grenier, MSW, LCSW, National RPMS Behavioral Health System CAC

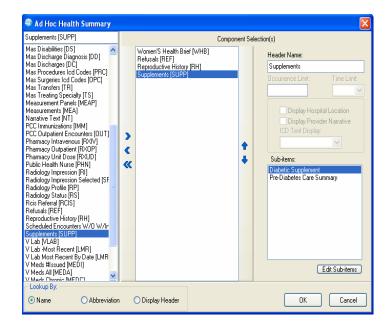
The Indian Health Service (IHS) Division of Behavioral Health, in partnership with the Office of Information Technology (OIT), has upgraded the IHS Resource and Patient Management System (RPMS) "Chemical Dependency Management Information System (CDMIS)" software application to the Behavioral Health System (BHS). Effective immediately, the OIT is decommissioning CDMIS and asking sites to ensure they have implemented the BHS software application in its place. Technical support for CDMIS ceased as of March 15, 2006.

The OIT released BHS in 2003 and deployed an enhanced Behavioral Health Graphical User Interface (BH GUI) version in 2004. The BHS expands CDMIS to cover a broader spectrum of care for mental health, social work, and alcohol and substance abuse. The BHS allows IHS, Tribal and Urban providers to document clinical services provided; to generate reports for local, Area and national use; and to export behavioral health data to the IHS National Programs and the Division of Behavioral Health.

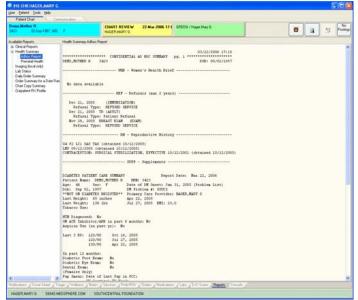
The majority of IHS sites have already converted to BHS or the enhanced BH GUI; however, there are a few sites that still need to be upgraded. These sites will receive emergency support for CDMIS and will be assisted in upgrading to the current BHS version.

Historical data in CDMIS is still available in BHS. The BHS includes a menu option that allows sites that have discontinued the use of CDMIS to transfer CDMIS data into BHS. The historical CDMIS data is contained in the subsequent BHS export. (The official RPMS namespace assigned to BHS is AMH. Please refer to the RPMS AMH User Manual for complete instructions on this function.)

For assistance in implementing BHS or BH GUI/Patient Chart, please contact your local Information Systems Coordinator. For more information about the RPMS behavioral health applications please visit: http://www.ihs.gov/cio/bh/



Indian Health Summary components have been converted to VA Health Summary components so they can be used in creating on-the-fly health summaries. The choices selected are in the middle column. Any applicable sub-items appear in the right column. Providers can also change the occurrence limit or the time limit as they choose.



Just click OK to get a personal health summary of only the components that were selected. This summary can be printed or simply viewed.

Thanks from the editor to Mary Hager for her information and screen shots.

Things to Remember

Properly dispose of sensitive information.

Be aware of your surroundings – question people in your area if they don't have a badge.

Safeguard your Passwords.

For more Tips visit the IHS Security Web Site at:

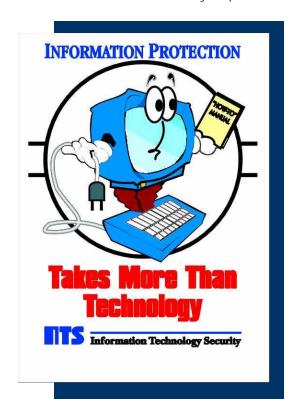
http://home.ihs.gov/ITSC-CIO/security/secpgm/

Store your back up data to a location that is separate from the data's original location.



IT Security Reminders

It takes more than constant advancements in technology to protect confidential information. Remember to do your part.



Security Awareness Tip: Back Up Your Data

By: Juan Torrez, Management Analyst, IHS/OIT/DIS

The start of a new year encourages us all to make resolutions. This year, resolve to back up your important data. Many people choose not to back up their data because they do not know how, they forget, they do not have the time, or they have not lost data before and so do not realize the importance. Backing up your data will protect against accidental data loss, catastrophic system failures, and unauthorized attacks that compromise data.

To ensure your information is safely stored:

- Back up your data regularly (i.e., weekly, monthly) using a diskette, compact disc (CD), network space, or external hard drive (backup data to a location that is separate from the original location of data).
- Ensure back up diskette, CD, network space, or external hard drive has adequate space and works properly.
- Label backup with the date and a description.
- Verify that the data was backed up properly by examining the contents of the backup and ensure the data works properly in the associated application.
- Keep printed copies of critical data.
- Store all electronic and printed backups securely to avoid improper disclosure.



All IHS
employees and
contractors of
IHS will be
required to have
annual training
on Section 508.

FAQ: Section 508

By: Joye Howe, Section 508 Coordinator, and Teagan Geneviene

What is Section 508?

Section 508 of the Rehabilitation Act of 1973, as amended in 1998, requires Federal departments and agencies that develop, procure, maintain, or use electronic and information technology to ensure that Federal employees and members of the public with disabilities have access to and use of information and data, comparable to that of Federal employees and members of the public without disabilities -- unless an undue burden would be imposed on the agency. (In short, Federal departments or agencies that develop, purchase, maintain, or even use: websites, PDFs, or other types of electronic information technology -- have to make sure that people who have disabilities can get to that technology and use it.)

Where can I get a copy of the standards?

The official Section 508 site is located at: http://www.section508.gov. Section 508 final standards are located at: http://www.access-board.gov/sec508/quide/

Why should I be trained for Section 508?

Implementing accessible solutions within your agency is required by Section 508, even if they don't currently have any employees with disabilities. This legislation is intended to address the needs of people with disabilities by creating standards for EIT procurements. The objective is to create an environment where everyone can work and in which you can attract and hire people with disabilities. The IHS goal is to make Section 508 standards and requirements part of daily operations.

Does everyone have to be trained?

Yes. HHS requires the training. All IHS employees and contractors will be required to have annual training on Section 508.

There are three "stages" of 508 training for various types of workers, as follows:

Stage I training is required for all IHS employees.

Stage II training is required for managers and other personnel.

Stage III training is required for personnel who are responsible for procurement, or who are responsible for other specialized or technical projects for specific audiences.

How will the training be done?

Depending on the type of training, it may be delivered online, in a class room, or by other means, depending on the need. See the article about Section 508 Accessibility of Electronic & Information Technology Training on the following page for additional training information.

How much will training cost?

There is no cost for Section 508 training.

I still have questions. Who can help me?

Each "agency" has a Section 508 Official. Our IHS 508 Coordinator is Joye Howe. Please direct questions, comments, suggestions, or requests for further information to Mrs. Howe at (505) 248-4171.







Section 508 Training Schedules

Section II training is available to all of IHS. We encourage those within Albuquerque and commutable distances to attend. Any travel expenses incurred will be the responsibility of your facility.

For the most up to date HHS Section 508 training schedule go to:

http://www.hhs508.org/

Section 508 Stage II Training

IHS Albuquerque, NM				
5300 Homestead Rd., NE				
April 25-26	Room 1-1			
Session 1	10AM – 12 PM			
Session 2	1:30 PM – 3 PM			

Web-Cast Training				
Dates to be scheduled soon				
Session 1 TBD				
Session 2	TBD			
Session 3	TBD			

Note: Each web-cast can only accommodate 100 people. **So, please sign up early.**

Section 508 Accessibility of Electronic & Information Technology Training

By: Joye Howe, Section 508 Coordinator, and Teagan Geneviene

Section 508 Training

Section 508 Stage I

Many of you have already completed Section 508 Stage I training. If you have not, please do so as soon as possible. Stage I training *must be completed by all IHS employees and contractors.* This training requires no travel. It can be done from the comfort of your own desk – and it's free!

The online Stage I training is located at:

http://intranet.hhs.gov/508/training. Once you have finished the Stage I training, be certain to print the certificate of completion. If you have to take Stage II training you must bring the certificate with you to the training. If you only need Stage I training, please file the certificate for future reference.

Section 508 Stage II

Section 508 Stage II training is mandatory for some employees. Managers with direct and indirect Section 508 roles and other Section 508-centric staff must complete Stage II training. These employees include:

- Agency Heads, Chief Information Officers, and Executives having Organization-wide responsibility for Information Technology (IT) activities
- Authorizing Officials: Managers and Supervisors who have authority to approve purchase requests, accept proposals, or make other acquisition decisions
- Requesting Officials: Managers and Supervisors who initiate acquisitions requisitions, write or evaluate Requests for Proposals/Information, or otherwise determine or evaluate IT technical requirements and/or inform as to product choice
- Program Managers, Project Managers, IT Development Leads and COTRs: Staff at any level responsible for directing IT projects, overseeing acceptance of EIT deliverables, or managing/supervising EIT development staff
- Procurement (Acquisitions) Officials
- Equal Employment Opportunity Program and Office of Civil Rights staff
- Section 508 Program Team members, including Officials and Coordinators
- Any persons who will be serving as Section 508 trainers

Cost

There is no charge for Section 508 Stage II training. Travel arrangements however, are the responsibility of the applicable facility or division.

Sign Up

For any Stage II training sessions (*including those held in Albuquerque*) you must go online to http://www.hhs508.org/.

<u>Remember</u>: You must bring the certificate of completion from the online Stage I training in order to attend Stage II training.

OIT Training Schedule

Please make note of the following class listing for OIT Training:

April Class Listing	Location	Date
Super End User	Mescalero	April 4
Patient Registration	Aberdeen Area	April 4-6
BH GUI	Bemidji Area	April 4-5
CRS	Oklahoma Area	April 5
EHR Overview	Warm Springs	April 5
BH Reports	Bemidji Area	April 6-7
POS	Navajo Area	April 11-12
PCC+	Sacramento	April 11-13
EHR Super End User	Claremore	April 12
Radiology	Bemidji Area	April 25-27
May Class Listing	Location	Date
BH Reports	Albuquerque Area	May 9-10
POS	Aberdeen Area	May 9-10
EHR Super End User	Gallup	May 9
Pharmacy 7/5	Portland Area	May 9-10
Patient Registration	Alaska Area	May 9-11
EHR Overview	Warm Springs	May 10
EHR Overview	Cherokee	May 10
EHR CAC	Albuquerque Area	May 15-19
PCC+	Window Rock	May 16-18
Third Party Billing/AR	Aberdeen Area	May 16-18
Intro to Lab	Albuquerque Area	May 23-25
POS	Billings Area	May 30-31
EHR Overview	Lame Deer	May 31
June Class Listing	Location	Date
PCC+	Albuquerque	June 6-8
Third Party Billing/AR	Alaska	June 6-8
Patient Registration	Oklahoma	June 13-15
EHR Camp	Albuquerque	June 19-23
EHR HIM & BO	Albuquerque	June 21-23

To register online for any of the above training go to: http://www.ihs.gov/Cio/RPMS/index.cfm?module=home&option=OlTrainingLinks

SAVE the DATE

The IHS Technology
Conference will be held
June 19-23.

The conference will be held in Albuquerque at the Convention Center.
The Doubletree is the hotel of choice.

APRIL 2006						
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MAY 2006						
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JUNE 2006							
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